

**McKESSON**  
Empowering Healthcare

McKesson Corporation and its affiliated companies (collectively referred to as "McKesson")  
**CUSTOMER APPLICATION**  
(Please print in block letters)

FAX TO: \_\_\_\_\_

CD01-S V.09-13

Type of Business: <input type="checkbox"/> Acute <input type="checkbox"/> Primary Care <input checked="" type="checkbox"/> Specialty <input type="checkbox"/> Home Health <input type="checkbox"/> Extended <input type="checkbox"/> Long Term <input type="checkbox"/> Pharmacy <input type="checkbox"/> Closed Door <input type="checkbox"/> Mail Order <input type="checkbox"/> Supplier <input type="checkbox"/> Other _____			
Mercy Services, Iowa City, Inc dba Mercy Specialty Clinic, Medical Oncology		42-1241044	
Legal Company Name		Federal Tax ID / EIN	
613 E Bloomington Street, Suite 100		IA 52245	
Legal Address (Main Office)		State Zip	
Maureen Brookhart		319-339-3917	
Contact Name we may call for questions regarding this application		Phone	
500 E Market Street		IA 52245	
Billing / Statement Address (if different than Main Office)		State Zip	
Cindy Gingerich	319-339-3575	319-339-3906	cindy.gingerich@mercyic.org
Accounts Payable Contact Person	Accounts Payable Telephone	Accounts Payable Fax	Accounts Payable Email
Shipping Information: <input type="checkbox"/> McKesson Specialty invoices will be sent to Billing Address unless indicated <input type="checkbox"/> Ship-to			
Mercy Services, Iowa City, Inc dba Mercy Specialty Clinic, Medical Oncology	\$500,000	\$ Unknown	13
DBA or Business Trade Name of Account	Estimated Monthly Purchases	Initial Order	Number of Employees
613 E Bloomington Street, Suite 100	Iowa City	IA	52245
Ship to Address	City	State	Zip
Sally Conley	319-339-3916	319-358-2794	sally.conley@mercyic.org
Shipping Contact Person	Shipping Contact Telephone	Shipping Contact Fax	Shipping Contact Email
2016 Has applicant, applicant's parent or affiliates ever filed for bankruptcy? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, attach explanation			
YEAR established	YEAR Current Ownership	State Org	
Ownership Type: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Private Corp <input type="checkbox"/> Public Corp <input type="checkbox"/> Professional Corp <input type="checkbox"/> Non-Profit Corp <input type="checkbox"/> Government			
Mercy Services, Iowa City, Inc		TIN# (See above)	
Principal Owner(s) or Stockholder(s)	% Ownership(s)	Social Security Number(s)	
Same as above			
NAME OF CONTROLLING ENTITY (if any)	Applicant's relationship to controlling entity	Phone	
Same as above			
Address of Controlling Entity	City	State	Zip
REFERENCES:			
Hills Bank	153999	Bethany Welsh	319-358-2226
Primary Bank/Financial Institution	Account Number	Contact Name	Phone
Multiple vendors (see contracts already supplied to McKesson)			
App Medical	NA	Joshua Heck	319-594-3631
Primary Technology Provider	Account Number	Contact Name	Phone
Additional Information Required (if applicable, please attach these documents to this application):			
<input type="checkbox"/> Copy of Resale/Tax Exemption Certificate	Dr James Feeley	BE2815592	Unknown
<input type="checkbox"/> Copy of DEA Registration, State Pharmacy License, or Medical License	DEA#	HIN#	MD24956 IA
<input type="checkbox"/> Copies of 3 most recent and consecutive primary supplier statements	Dr Scott Miller	DEA: BM16719390	MD36769 IA
<input type="checkbox"/> Annual Financial Statements for the past 2 years (including balance sheet, income statement, and cash flow statements)			
This section applies to all "McKESSON SPECIALTY DISTRIBUTION LLC, McKESSON SPECIALTY CARE DISTRIBUTION CORPORATION" accounts only			
Customer agrees to abide by, and acknowledges having received and reviewed, McKesson's Returns Policy (including reporting to McKesson all claims for damaged or missing product within 48 hours of receipt of product). Price billed is the current price in effect at the time of item shipment. Customer hereby consents to allow McKesson to share information contained in the Customer Application and other related information, including without limitation payment history and credit status, with the manufacturers of certain specialty pharmaceutical products (if such products are purchased by Customer through McKesson) and affiliates of such manufacturers. A list of the manufacturers to which McKesson currently provides information is available from McKesson on request.			
This section applies to all accounts with McKESSON CORPORATION and its affiliated companies ("McKesson")			
Customer agrees to abide by (I) standard terms of sale provided or made available by McKesson and/or shown on McKesson's invoices or statements and (II) any written agreement or terms of sale with McKesson governing Customer's account. Customer agrees to pay for all purchases, fees and other charges incurred by Customer or an authorized user on any account of Customer, including service charges on past due amounts at the highest rate permitted by law (including purchases shipped and/or billed to a third-party agent on behalf of Customer). Any payment made after the net due date shall result in the loss of any prompt cash payment discount specified on the related invoice or statement and Customer shall pay the gross amount plus any applicable service charges. Without limiting McKesson's other legal rights, McKesson may exercise a right of set-off against amounts due Customer from McKesson Corporation or any of its affiliates. McKesson reserves the right, in its sole discretion, to change a payment term (including imposing cash payment upon delivery), to limit total credit and/or to suspend or discontinue the shipment of any orders to Customer if McKesson concludes that (I) there has been a material adverse change in the Customer's financial condition or payment performance or (II) Customer has ceased or is likely to cease to meet McKesson's credit requirements.			
Customer represents that it is entitled to discounted prices from manufacturers as it has notified McKesson ("Contract Prices"). In consideration of McKesson allowing Customer to purchase products at Contract Prices, Customer represents that McKesson will be paid by the appropriate manufacturer the McKesson allowing Customer to purchase products at Contract Prices. Customer represents that McKesson will be paid by the appropriate manufacturer the difference between McKesson's acquisition price and the Contract Price ("Chargeback") and Customer will be liable to McKesson for any unpaid Chargeback if any manufacturer (I) denies a Chargeback for any reason, (II) makes an assignment for the benefit of creditors, files a petition in bankruptcy, is adjudicated insolvent or bankrupt, or if a receiver or trustee is appointed with respect to a substantial part of its property or a proceeding is begun which will substantially impair its ability to pay Chargebacks or (III) fails to pay McKesson Chargebacks for any reason other than McKesson's gross negligence.			
The Federal Equal Credit Opportunity Act prohibits creditors from discriminating due to race, color, religion, national origin, sex, marital status, age; or because all or part of the Customer's income is from any public assistance program; or the Customer, in good faith, exercises any right under the Consumer Credit Protection Act. The Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580 administers compliance with this law. Customer represents and warrants that Customer has read and understands this form and has reviewed the information provided in its entirety, including responses completed for Customer by a McKesson representative, and that all information is complete and correct. Customer agrees that McKesson will be relying on such information and will notify McKesson of any material changes to such information.			
Customer agrees to provide McKesson with financial statements upon request. Customer authorizes McKesson, its employees, representatives, and agents to (I) investigate information provided and Customer's credit, financial and banking records, (II) obtain Customer's credit bureau report and (III) share with its affiliates experiential and transactional information regarding Customer and Customer's account. McKesson is authorized to retain information obtained as part of the application process whether or not the requested account and/or credit is granted. Customer agrees to pay all reasonable attorney fees and expenses or cost incurred by McKesson in enforcing its rights to collect amounts due from Customer. This form and any account opened in favor of Customer are subject to credit approval by McKesson.			

By signing below, the undersigned authorized McKesson to order a consumer report related to the business principal(s) to determine credit eligibility.

Kelly Durian  
Authorized Signature  
(This form must be signed by a Corporate Officer, Partner, Owner or Authorized Agent)

Print Name

Kelly Durian

Vice President of Mary Samis  
Title

11/22/16  
Date